DECLARATION FOR UTILITY OR		R Attorney Docket No.	DURE-034
DESIGN PATENT APPLICATION (37 CFR 1.63)		N First Named Inventor	Puel, et al.
(3	/ CFR 1.03)	Application Number	10/525,624
1_		<del></del>	
Declaration	<b>X</b> Declaration	I.A. Filing Date	09/06/2002
Submitted with	OR Submitted after Is	itial Group Art Unit	Unknown
Initial Filing	Filing (surcharge (37 CFR 1.16(e))	Examiner Name	Unknown
	required)		

As a below named inventor, I hereby declare that:
My residence, mailing address, and citizenship are as stated below next to my name.

patent is sought on the invention entitled:

Number(s)

PCT/US02/28519

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a

## DELIVERY OF MODULATORS OF GLUTAMATE- MEDIATED NEUROTRANSMISSION TO THE INNER EAR

The specification of	which			
is attached heret				
or				
was filed on 06	Sept 2002 as Uni	ted States Application	Number or PCT Inter	national Application
Number PCT/US	02/28519 and wa	as amended on	(if ap	plicable)
including the claims, I acknowledge the du	as amended by any ar	nendment specifically tion which is material	f the above identified so referred to above. to patentability as deformation which became	ined in 37 CFR
			ional filing date of the	
application (s) for pa international applicat listed below and have inventor's or plant be	tent, inventor's or plar tion which designated e also identified below	nt breeder's rights cert at least one country of y, by checking the box ate(s), or any PCT inte	d) or (f), or 365(b) of a ificate(s), or 365(a) of her than the United St, any foreign application had application by	any PCT ates of America, on for patent,
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?

06 Sept 2002

■ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/0213 attached hereto:

(Y/N)

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below.

Application Serial No.	Filed	Status (Pending, Abandoned, Patented)

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States applications listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in said prior applications in the manner required by the first paragraph of Title 35, United States Code Section 112, I acknowledge my duty to disclose material information as defined in Title 37 Code of Federal Regulation, Section 1.56(a) which occurred between the filing dates of the prior applications and the national or Patent Cooperation Treaty international Filing date of this application:

Application Serial No.	Filed	Status (Pending, Abandoned, Patented)
		-

## **DECLARATION-** Utility or Design Patent Application

Direct all correspondence to:	Customer numbe		OR Correspondence		
below.	Or barcode label	31498	address		
Name:					
Address:		<del></del>			
City:	State:		7:-		
	Telephone:		Zip		
Country:  I hereby declare that all statements mad		dge are true and that all	Fax: statements made on information or belief		
are believed to be true; and further that	these statements were made nment, or both, under 18 U.:	with the knowledge that	tt willfu! false statements and the like so willful false statements may jeopardize the		
NAME OF SOLE OR FIRS		a petition has	a petition has been filed for this unsigned		
		inventor			
Given Name (first and middle [if any]) Jean-Luc		Family Name Or Surname	Puel		
Inventor's		11 1	• /•		
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	•				
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NAME OF SECOND INVENTOR:		a petition has been filed for this unsigned inventor			
Given Name		Family Name			
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[V]			(s) Sheei(s) PTO/SR/02A attached hereto		

DECLA	RATION	ADDITIONAL INVENTOR(S) Supplemental Sheet - Page 2 of 2		
Name of Additional Joint Inventor:		a petition has been filed for this unsigned inventor		
			for this unsigned inventor	
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(first and middle [if any])		Or Surname		
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Signature		Date		
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Name of Additional Jo	74.5		-	
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Given Name		Family Name		
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